



**GOODYEAR POLICE DEPARTMENT**  
**TEEN POLICE ACADEMY TRAINING (TPAT)**  
14455 W. Van Buren St. Suite E101, Goodyear, AZ 85338  
Contact Officer Don Host, TPAT Advisor – Phone: 623-980-2364  
Email: [mmcfadden@goodyearaz.gov](mailto:mmcfadden@goodyearaz.gov)

**DATES OF ACADEMY**  
**JULY 18 – 22, 2016**  
**(Monday through Friday) 8AM to 4 PM**

**QUALIFICATIONS:**

At the time application for attendance is submitted, applicant must be at least 14 years of age and not more than 18 years of age. He/she must be enrolled in high school with a passing grade or graduated in 2016.

Applicant **must** furnish his/her transportation to and from The Goodyear Police Department Training Building (986 South Litchfield Road, Goodyear 85338) or other directed venue location.

**NOTE:** This program is centered around and geared for students interested in law enforcement or criminal justice opportunities. All applicants must be of good moral character, with no significant and/or violent criminal activity, gang associations/affiliations or arrest history. A background check and interview will be conducted on ALL applicants prior to full acceptance into this academy program so as to determine suitability, maturity and eligibility. Students not exercising suitable behavior or who become disruptive during any portion of this course may be subject to termination from this program (with no refund given). Minor criminal infractions (e.g. shoplifting) may not automatically exclude participation. Applicants will be notified in writing of a scheduled interview time prior to being accepted into the academy. Applicants successfully meeting the above requirements will be notified via letter mailed to the address provided on their application if e-mail is not available to them.

**ESSAY:**

A typed or neatly written 250 word essay shall be completed and attached to this application prior to submittal. Applicants must detail in 250 words or less reasons why they want to attend the teen academy and what have they done to prepare for it.

**COSTS:**

**\$50.00 (check or money order only, payable to the Goodyear Police Department)** This cost covers a Goodyear Teen Police Academy polo shirt, which all participants are required to wear during the Teen Academy, and the graduation ceremony expenses.

# APPLICATION

**ALL BLANKS MUST BE FILLED IN:** Incomplete applications will not be considered.

## **PERSONAL DATA:**

(Please print or type)

\_\_\_\_\_  
(Last Name) (First Name) (MI)

\_\_\_\_\_  
(Age) (Date of Birth) (Sex: Male/Female)

\_\_\_\_\_  
(Mothers Name) (Fathers Name)

## **ADDRESS:**

\_\_\_\_\_  
(Number, Street, Avenue, Etc.) (City/Town) (State) (Zip)

\_\_\_\_\_  
(Home Phone) (Parent Work Number) (Parent Cell Phone Number)

\_\_\_\_\_  
(Parent/Guardian's Name, Address, Telephone Number; Etc., if different from above)

\_\_\_\_\_  
(Parent email address)

\_\_\_\_\_  
(Applicants Signature) (Date)

## **MEDICAL INFORMATION:**

\_\_\_\_\_  
(Family Physician's Name) (Telephone)

\_\_\_\_\_  
(List any allergies and/or medication presently prescribed)

Medical Insurance: \_\_\_\_\_ Policy # \_\_\_\_\_

## **EMERGENCY AUTHORIZATION:**

I, \_\_\_\_\_ AS PARENT OR GUARDIAN OF THE APPLICANT, DO  
HEREBY CONSENT TO THE PERFORMANCE OF MEDICAL AND DENTAL CARE, INCLUDING OPERATIONS,  
FOR THIS APPLICANT. THIS WILL BE DONE ONLY IN AN EMERGENCY SITUATION BY LICENSED  
MEDICAL PERSONNEL. **\*\*ATTACH A PHOTOCOPY (Both Sides) OF THE INSURANCE CARD TO THIS  
APPLICATION.**

\_\_\_\_\_  
(Signature of Parent or Guardian) (Date)

## **MEDICATION NOTIFICATION TO ACADEMY STAFF:**

I, \_\_\_\_\_ AS THE PARENT OR GUARDIAN OF THE APPLICANT, I DO HEREBY AGREE TO NOTIFY THE TPAT STAFF IN WRITING OF ANY DISPENSED MEDICATIONS AND/OR FIRST AID SUPPLIES THAT THE APPLICANT WOULD USE WHILE AT THE TEEN ACADEMY, SUCH AS, BUT NOT LIMITED TO; ASPIRIN, PAIN MEDICATION, ALLERGY MEDICATION, AND WRAPPINGS, ETC .

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
(Date)

## **REASON FOR MEDICATION(s):**

\_\_\_\_\_  
\_\_\_\_\_

## **PRIOR INJURY/EXISTING INJURY DISCLAIMER:**

Injury: \_\_\_\_\_ Date: \_\_\_\_\_  
Injury: \_\_\_\_\_ Date: \_\_\_\_\_  
Injury: \_\_\_\_\_ Date: \_\_\_\_\_

I do hereby certify that the above named applicant has not had any prior injury or a current existing injury, which will hinder his/her performance while attending the academy. I understand that by not disclosing any such prior injury or existing injury that the applicant may be sent home in the event such occurs or is revealed while attending the academy.

\_\_\_\_\_  
(Signature of Parent, Guardian or Applicant if 18 yrs old)

\_\_\_\_\_  
(Date)

## **UNIFORM:**

Goodyear Police Department "polo" style shirts with TPAT logo will be supplied to all attendees (offset by the \$50.00 participation fee). Those selected to attend must supply their own jeans, belt and shoes. All clothing must fit properly. Polo shirt will be tucked in at all times. **No bandanas, gang clothing (displaying gang affiliation, area codes, slang or associated ideologies) are accepted.** No oversized or baggy styles will be permitted. Belts shall be a black conservative style with no printing or other ornate decoration. Shoes shall be casual and conservative in style. Tennis shoes are allowed, however, they shall be conservative in style with no ornate decoration. **At no time will sandals or flip flops be allowed.** The Goodyear Police Department and TPAT staff reserves the right to determine appropriate clothing appearance.

**Select appropriate "polo" shirt size:**

\_\_\_Adult Small \_\_\_Adult Medium \_\_\_Adult Large \_\_\_Adult X-Large \_\_\_Adult 2XL

## **QUESTIONS/CONCERNS:**

**Should you have any questions or concerns, please contact the listed TPAT coordinators.**

**APPLICATION DEADLINE: Friday, May 29, 2016.**

**RETURN ALL APPLICATIONS TO:**

**GOODYEAR POLICE DEPARTMENT  
ATTN: Officer D. Host  
14455 W. Van Buren St. Suite E101  
GOODYEAR, AZ 85338**

# GOODYEAR POLICE TEEN ACADEMY: MEDIA/PHOTO RELEASE

(Please print)

I, (parent/guardian) \_\_\_\_\_ give permission for my child,

\_\_\_\_\_  
(Participant Last Name)

\_\_\_\_\_  
(Participant First Name)

\_\_\_\_\_  
(MI)

\_\_\_\_\_  
(Age)

\_\_\_\_\_  
(Sex: Male/Female)

\_\_\_\_\_  
(Date of Birth)

to be photographed and/or videotaped during the Goodyear Police Teen Academy. I understand that these photos/images of my child may be used on Police Department social media, City website, television media and/or print (newspaper) media. I also understand that photos may be used to promote future Teen Academy classes. I hereby release the Goodyear Police Department of any liability related to such photo/media images.

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Parent/Guardian Printed Name)

I, (participant 18 y/o printed name) \_\_\_\_\_ am over the age of 18 and agree to be photographed.

\_\_\_\_\_  
(Participant's signature)